

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000002945

**FILED**  
**Jan 16, 2012**  
**Secretary of State**

**Entity Name:** AMVETS POST 20 OF PERRY, INC.

**Current Principal Place of Business:**

3548 WOODS CREEK RD  
PERRY, FL 32347

**New Principal Place of Business:**

**Current Mailing Address:**

3548 WOODS CREEK RD  
PERRY, FL 32347

**New Mailing Address:**

**FEI Number:** 41-2073058

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

FRANKLIN, DALE  
215 CYPRESS RD  
PERRY, FL 32348 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** FRANKLIN, DODD  
**Address:** 3548 WOODS CREEK ROAD  
**City-St-Zip:** PERRY, FL 32348

**Title:** OD  
**Name:** PAGIE, DANIEL  
**Address:** 3592 WHIPPOORWILL WAY  
**City-St-Zip:** PERRY, FL 32348

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** DODD FRANKLIN

TREA

01/16/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date